

DECLARATION AND POWER OF ATTORNEY

(ORIGINAL, DESIGN, NATIONAL STAGE OF PCT OR CIP APPLICATION)

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name, I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

GENE THERAPY BY SMALL FRAGMENT HOMOLOGOUS REPLACEMENT

the specification of which: *(complete (a), (b) or (c) for type of application)*

REGULAR OR DESIGN APPLICATION

(a) ☐ is attached hereto.

(b) ☒ was filed on June 7, 1995 as Application Serial No. 08/487,799.

PCT FILED APPLICATION ENTERING NATIONAL STAGE

(c) ☐ was described and claimed in International Application No. _____ filed on _____ and as amended on _____

ACKNOWLEDGEMENT OF REVIEW OF PAPERS AND DUTY OF CANDOR

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose the information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations § 1.56(a).

☐ In compliance with this duty there is attached an information disclosure statement. 37 C.F.R. 1.97.

PRIORITY CLAIM

I hereby claim foreign priority benefits under Title 35, United States Code, § 119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed.

(complete (d) or (e))

(d) ☒ no such applications have been filed.

(e) ☐ such applications have been filed as follows

**EARLIEST FOREIGN APPLICATION(S), IF ANY FILED WITHIN 12 MONTHS
(6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION**

Country	Application No.	Date of filing (day, month, year)	Date of issue (day, month, year)	Priority Claimed
				<input type="checkbox"/> YES NO <input type="checkbox"/>
				<input type="checkbox"/> YES NO <input type="checkbox"/>
				<input type="checkbox"/> YES NO <input type="checkbox"/>

**ALL FOREIGN APPLICATION(S), IF ANY FILED MORE THAN 12 MONTHS
(6 MONTHS FOR DESIGN) PRIOR TO SAID APPLICATION**

CONTINUATION-IN-PART

(complete this part only if this is a continuation-in-part application)

I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application.

<u>08/409,544</u> (Application Serial No.)	<u>March 24, 1995</u> (Filing Date)	<u>Pending</u> (Status) (patented, pending, abandoned)
<u>PCT/US93/07917</u> (Application Serial No.)	<u>August 20, 1993</u> (Filing Date)	<u>Pending</u> (Status) (patented, pending, abandoned)
<u>07/933,471</u> (Application Serial No.)	<u>August 21, 1992</u> (Filing Date)	<u>Pending</u> (Status) (patented, pending, abandoned)

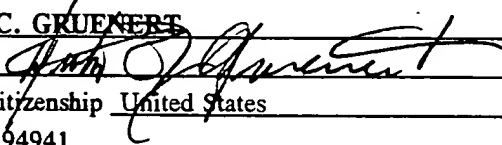
POWER OF ATTORNEY

As a named inventor, I hereby appoint HANA DOLEZALOVA, Registration No. 30,518, HUGH D. FINLEY, Registration No. 27,548, HOWARD M. PETERS, Registration No. 29,202, ALLSTON L. JONES, Registration No. 27,906, JANIS BIKSA, Registration No. 33,648, and MICHAEL N. BERG, Registration No. 32,195, all of the address listed below, my principal attorney and agents, with full power of substitution and revocation, to appoint other principal and associate attorneys, to prosecute this application, and to transact all business in the Patent and Trademark Office connected therewith.

SEND CORRESPONDENCE TO:

Hana Dolezalova
PHILLIPS, MOORE, LEMPIO & FINLEY
385 Sherman Avenue, Suite 6
Palo Alto, CA 94306-1840
Telephone No.: (415) 324-1677

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Full Name of sole or first inventor DEITER C. GRUENERT
Inventor's signature 
Date June 30, 1995 Country of Citizenship United States
Residence 130 Cascade Drive, Mill Valley, CA 94941
Post Office Address Same as above

Full Name of second joint inventor, if any KARL KUNZELMANN
Inventor's signature _____
Date _____ Country of Citizenship Germany
Residence 141 Michellbachweg 79194, Wildtal, Germany
Post Office Address Same as above

CHECK PROPER BOX(ES) FOR ANY ADDED PAGE(S) FORMING A PART OF THIS DECLARATION

- ☐ Signature for third and subsequent joint inventors. Number of pages added _____.
- ☐ Signature by administrator(trix), executor(trix) or legal representative for deceased or incapacitated inventor. Number of pages added _____.
- ☐ Signature for inventor who refuses to sign or cannot be reached by person authorized under 37 C.F.R. 1.47. Number of pages added _____.

CONTINUATION-IN-PART

(complete this part only if this is a continuation-in-part application)

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Full Name of sole or first inventor DEITER C. GRUENERT

Inventor's signature _____

Date _____ Country of Citizenship United States

Residence 130 Cascade Drive, Mill Valley, CA 94941

Post Office Address Same as above

Full Name of second joint inventor, if any KARL KUNZELMANN

Inventor's signature Karl Kunzelmann

Date 2/17/95 Country of Citizenship Germany

Residence 141 Michellbachweg 79194 Wildtal, Germany

Post Office Address Same as above

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